FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1 (See instructions)			Office use only		
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5		
All America P	лс 				
ADDRESS (number and s	P.O. Box 2888				
X (Check if addre	Washington		DC 20013 _		
COMMITTEE'S E-MAII	ADDRESS	CITY▲	STATE▲ ZIP CODE ▲		
sarah@evanba					
	1111111111				
COMMITTEE'S WEB F	PAGE ADDRESS (URL)		·		
http://allameri	capac.com				
COMMITTEE'S FAX N 2026549663	UMBER				
2. DATE M M M	/ D D / Y Y Y Y Y 2007				
3. FEC IDENTIFICATION	TION NUMBER	C C00344788			
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)			
I certify that I have examin	ned this Statement and to the best of my ki	nowledge and belief it is true, correct a	nd complete		
Type or Print Name of	Treasurer Jerry Howe, Jr.				
Signature of Treasurer	Electronically Filed by Jerry Ho	we, Jr.	Date 10 / 05 / Y Y Y Y		
NOTE: Submission of fals		nay subject the person signing this Sta	tement to the penalties of 2 U.S.C. S437g. WITHIN 10 DAYS		
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530			

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5.	5. TYPE OF COMMITTEE (Check One)		
	(a) This committee is a principal campaign	committee. (Complete the candidate information bel	ow.)
	(b) This committee is an authorized commit information below.)	ttee, and is NOT a principal campaign committee. (0	Complete the candidate
	Name of Candidate		
	Candidate Office Party Affiliation Sought:	House Senate Pr	State resident District
	(c) This committee supports/opposes only of	ne candidate, and is NOT an authorized committee.	
	Name of Candidate		
	(d) This committee is a	(National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	(e) This committee is a separate segregated	I fund	
	(f) X This committee supports/opposes more committee.	than one Federal candidate, and is NOT a separate	segregated fund or party
6.	6. Name of Any Connected Organization or Affiliated	Committee	
L			
	Mailing Address		
		CITY▲ STATE▲	ZIP CODE
	Relationship		
	Type of Connected Organization:		
	Corporation	Corporation w/o Capital Stock La	bor Organization
	Membership Organization	Trade Association Co	poperative

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Write or Type Committee Name			
All America PAC			
<ol> <li>Custodian of Records: Identification possession of Committee book</li> </ol>	y by name, address, (phone number oks and records.	optional), and position of t	he person in
Full Name Jerry How	e, Jr.		
Mailing Address	P.O. Box 2888		
_	Washington	DC	20013 _
Title or Position ♥	CITY A	STATE▲	ZIP CODE A
Treasurer		Telephone number	
3. Treasurer: List the name and name and address of any des  Full Name of Treasurer  Mailing Address	d address (phone number optional) of signated agent (e.g., assistant treasurer e, Jr.  P.O. Box 2888	f the treasurer of the comm	
- Walling Address			
_	Washington	DC	20013 –
Title or Position ♥	CITY A	STATE▲	ZIP CODE A
Treasurer		Telephone number	
Full Name of Designated Agent			
Mailing Address			
Title or Position ♥	CITY A		ZIP CODE A
		Telephone number	

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9.	Banks or Other Do safety deposit boxe Name of Bank, Dep	es or maintains funds.	rents
	Mailing Address	National Bank of Indianapolis  107 N Pennsylvania Street	
		Indianapolis IN 46204	]-[
		CITY A STATE A ZIP CO	ODE 🛆

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Banks or Other Depositorie safety deposit boxes or maint Name of Bank, Depository, et	ains funds.	other depositories in which t	he committee o	deposits funds	, holds accounts, rents
Raym	ond James & Asso	ociates, Inc.			
Mailing Address	1825 Eye Stree	et, NW			
			1 1 1 1		
	Washington			DC	20006
		CITY △		STATE △	ZIP CODE 🛆
Name of Any Connected C	organization or Affiliate	ed Committee			[ ADDITIONAL ]
1					
Mailing Address					
		CITY		STATE A	ZIP CODE A
Relationship					
Type of Connected Organiza	ition:				
Type of Connected Organiza  Corporation	ation:	Corporation w/o Capital	Stock	Lab	or Organization

Designated Agent		[ ADDITIONAL ]		
Full Name				
Title or Position ▼	CITY A			
		elephone number		